

**COPY OF PAPERS
ORIGINALLY FILED**

Please type a plus sign (+) inside this box →

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	<i>RECEIVED</i>
Title	
Group Art Unit	AUG 09 2002
Examiner Name	
Attorney Docket Number	Technology Center 2100

I hereby appoint:

Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

OR

Practitioner(s) named below:

Name	Registration Number
Kendall Ian Thiessen	45158
Glenn K. Beaton	30995

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

OR

Firm or
Individual Name

Gibson, Dunn & Crutcher LLP

Address

1801 California St., Suite 4100

Address

City

Denver

State

CO

Zip 80202

Country

USA

Telephone

303.298.5700

Fax

303.296.5310

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Todd Siler

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Jul. 30. 2002 10:57AM GIBSON DUNN & CRUTCHER DVR 2

No. 2017 P. 2

Please type a plus sign (+) inside this box → +

PTO/SB/81 (08-01)
Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	
Title	
Group Art Unit	AUG 9 2002
Examiner Name	
Attorney Docket Number	Technology

RECEIVED

AUG 9 2002

Technology Center 2100

I hereby appoint:

 Practitioners at Customer Number

[]

Place Customer
Number Bar Code
Label here

OR

 Practitioner(s) named below:

Name	Registration Number
Kendall Ian Thieszen	45158
Glenn K. Beaton	30995

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.Place Customer
Number Bar Code
Label here

OR

 Practitioners at Customer Number

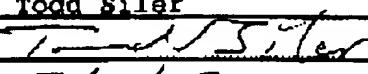
[]

<input type="checkbox"/> Firm or Individual Name	Gibson, Dunn & Crutcher LLP			
Address	1801 California St., Suite 4100			
Address				
City	Denver	State	CO	Zip
Country	USA			
Telephone	303.298.5700	Fax	303.296.5310	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/9d).

SIGNATURE of Applicant or Assignee of Record

Name	Todd Siler
Signature	
Date	7/30/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.